

## **MINOR NPDES PERMIT MODIFICATION**

issued to

Pfizer Inc.  
445 Eastern Point Road  
Groton, Connecticut 06340

**Location Address:**

445 Eastern Point Road  
Groton, Connecticut 06340

**Facility ID:** 059-003

**Permit ID:** CT0000957

**Receiving Stream:** Thames River

**Permit Expires:** July 28, 2013

This minor permit modification is issued in accordance with section 22a-430 of Chapter 446k, Connecticut General Statutes ("CGS"), section 22a-430-4(p)(5) of the Regulations of Connecticut State Agencies ("RCSA") adopted thereunder, as amended, and Section 402(b) of the Clean Water Act, as amended 33 USC 1251, et. seq., and pursuant to an approval dated September 26, 1973, by the Administrator of the United States Environmental Protection Agency for the State of Connecticut to administer a N.P.D.E.S. permit program.

Pfizer Inc, ("Permittee"), shall comply with all conditions of Permit No. CT0000957 issued on July 29, 2008 with the following modification:

*To clarify the effective date of the effluent limitations associated with bis (2-ethylhexyl) phthalate, footnote number 7 has been added to Table A. This footnote reads: "In accordance with the compliance schedule provided in Section 10(C) of this permit, these limits will take effect 365 days after issuance of this permit until permit expiration." The revised Table A is attached. Revisions are in bold.*

The Commissioner reserves the right to make appropriate revisions to the permit in order to establish any appropriate effluent limitations, schedules of compliance, or other provisions that may be authorized under the Clean Water Act or the Connecticut General Statutes or regulations adopted thereunder, as amended. The permit as modified under this paragraph may also contain any other requirements of the Clean Water Act or Connecticut General Statutes or regulations adopted thereunder which are then applicable.

All other terms and conditions of Permit No. CT0000957 issued on July 29, 2008 shall continue in full force and effect.

This minor modification is hereby issued on October 23, 2008.

/s/ KIM E. HUDAK

KIM E. HUDAK, Assistant Director  
Bureau of Materials Management and Compliance Assurance

**Table A**

Discharge Serial Number: <b>008-1</b>						Monitoring Location: <b>1</b>			
Wastewater Description: <b>Utilities wastewaters (unused steam condensate, water softener regeneration wastewater, shell and tube heat exchanger wastewater, boiler blowdown, boiler washdown, boiler blowdown lab wastewater, and cooling tower blowdown), utilities contact cooling water (barometric condensor water) and chilled water, and stormwater</b>									
Monitoring Location Description: <b>Basin instrument trailer on the west side of the effluent basin</b>									
PARAMETER	UNITS	FLOW/TIME BASED MONITORING				INSTANTANEOUS MONITORING			Minimum Level Test <sup>3</sup>
		Average Monthly Limit	Maximum Daily Limit	Sample//Reporting Frequency <sup>2</sup>	Sample Type or Measurement to be reported	Instantaneous limit or required range	Sample//Reporting Frequency <sup>2</sup>	Sample Type or measurement to be reported	
Aquatic Toxicity, <i>Mysidopsis bahia</i> NOAEL = 100% [See notes 4,5 & 6 below]	%	NA	≥90% survival	Semi-annual	Daily Composite	≥90% survival	NR	Grab	
Aquatic Toxicity, <i>Cyprinodon variegatus</i> NOAEL=100% [See notes 4,5 & 6 below]	%	NA	≥90% survival	Semi-annual	Daily Composite	≥90% survival	NR	Grab	
Ammonia (as N)	mg/l	NA	---	Monthly	Daily Composite	NA	NR	NA	
Bis (2-ethylhexyl) phthalate	mg/l	0.006 <sup>7</sup>	0.012 <sup>7</sup>	Weekly	Daily Composite	0.018 <sup>7</sup>	NR	Grab	*
BOD <sub>5</sub>	mg/l	NA	---	Monthly	Daily Composite	NA	NR	NA	
Chlorine, Total Residual	mg/l	NA	0.2	Quarterly	GSA	NA	NR	Grab	*
Chromium, Total	mg/l	NA	---	Quarterly	Daily Composite	NA	NR	NA	*
Copper, Total	mg/l	NA	---	Quarterly	Daily Composite	NA	NR	NA	*
Flow, Average and Maximum <sup>1</sup>	MGD	70	70	Continuous// Monthly	Daily Flow	NA	NR	NA	
Flow Rate, Day of Sampling	MGD	NA	70	Weekly	Daily Flow	NA	NR	NA	
Iron, Total	mg/l	3.0	5.0	Quarterly	Daily Composite	NA	NR	NA	
Lead, Total	mg/l	NA	---	Quarterly	Daily Composite	NA	NR	NA	*
Nickel, Total	mg/l	NA	---	Quarterly	Daily Composite	NA	NR	NA	*
Nitrogen, Kjeldahl, Total	mg/l	NA	---	Monthly	Daily Composite	NA	NR	NA	
Nitrogen, Nitrate, Total	mg/l	NA	---	Monthly	Daily Composite	NA	NR	NA	
Nitrogen, Nitrite, Total	mg/l	NA	---	Monthly	Daily Composite	NA	NR	NA	
Oil and Grease, Total	mg/l	NA	5.0	Quarterly	GSA	7.5	NR	Grab	
pH, Continuous	S.U.	NA	NA	NR	NA	6.0-9.0	Continuous// Monthly	RDM	
pH, Day of Sampling	S.U.	NA	NA	NR	NA	6.0-9.0	Weekly	RDS	
Solids, Total Suspended	mg/l	NA	---	Monthly	Daily Composite	NA	NR	NA	
Temperature	°F	NA	NA	NR	NA	90	Continuous// Monthly	Instantaneous	
Zinc, Total	mg/l	NA	---	Monthly	Daily Composite	NA	NR	NA	*
Fecal coliform	#/100 ml	NA	NA	NR	NA	---	Quarterly	Grab	
Escherichia coli [See Remark 2]	#/100 ml	NA	NA	NR	NA	---	Quarterly	Grab	

**Table A**

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Monitoring Location Description: <b>Basin instrument trailer on the west side of the effluent basin</b>	

PARAMETER	UNITS	FLOW/TIME BASED MONITORING				INSTANTANEOUS MONITORING			Minimum Level Test <sup>3</sup>
		Average Monthly Limit	Maximum Daily Limit	Sample//Reporting Frequency <sup>2</sup>	Sample Type or Measurement to be reported	Instantaneous limit or required range	Sample//Reporting Frequency <sup>2</sup>	Sample Type or measurement to be reported	
Nitrogen (Total) [See Remark 3]	kg/day	NA	---	Monthly	Daily Composite	NA	NR	NA	
Nitrogen (Total), by Jan 2009 [See Remark 3]	kg/day	200	300	Monthly	Daily Composite	NA	NR	NA	
Nitrogen (Total) by Jan 2014 [See Remark 3]	kg/day	150	200	Monthly	Daily Composite	NA	NR	NA	

**Table A Footnotes and Remarks:**

**Footnotes:**

- <sup>1</sup> For this parameter, the Permittee shall maintain at the facility a record of the total flow for each day of discharge and shall report the Average Daily Flow and the Maximum Daily Flow for each month.
- <sup>2</sup> The first entry in this column is the ‘Sample Frequency’. If a ‘Reporting Frequency’ does not follow this entry and the ‘Sample Frequency’ is more frequent than monthly then the ‘Reporting Frequency’ is monthly. If the ‘Sample frequency’ is specified as monthly, or less frequent, then the ‘Reporting Frequency’ is the same as the ‘Sample Frequency’.
- <sup>3</sup> Minimum Level Test refers to Paragraph (6)(A)(3) of this permit.
- <sup>4</sup> Compliance with aquatic toxicity limits shall be based on the first 48 hours of a valid chronic toxicity test.
- <sup>5</sup> For compliance with aquatic toxicity instantaneous limits, see Section 6, paragraph B.
- <sup>6</sup> The results of the toxicity tests shall be recorded in % on the DMR.
- <sup>7</sup> **In accordance with the compliance schedule provided in Section 10(C) of this permit, these limits will take effect 365 days after issuance of this permit until permit expiration.**

**Remarks:**

- Monitoring for *Escherichia coli* shall be applicable from May 1<sup>st</sup> to September 30<sup>th</sup>.
- The Permittee shall meet the above-noted total nitrogen targets for purposes of achieving water quality standards for dissolved oxygen in Long Island Sound. The total nitrogen target shall consist of the arithmetic sum of the following: Ammonia (Nitrogen), Nitrogen (Kjeldahl), Nitrogen (Nitrate), and Nitrogen (Nitrite).